

OBESITY, NUTRITION, AND PHYSICAL ACTIVITY & CANCER RISK

[IN ADULTS]

IN ADDITION TO INCREASING THE RISK FOR CANCER AND OTHER CHRONIC DISEASES, OVERWEIGHT AND OBESITY PLACE A HUGE FINANCIAL BURDEN ON THE HEALTH CARE SYSTEM IN THE UNITED STATES. OBESITY ALONE COSTS THE NATION

**\$147
BILLION**

IN DIRECT MEDICAL
COSTS EACH YEAR.

FOR THE MAJORITY OF AMERICANS
WHO DO NOT USE TOBACCO,
THE GREATEST MODIFIABLE
DETERMINANTS OF CANCER RISK ARE



**WEIGHT
CONTROL,**



**DIETARY
CHOICES,**



**PHYSICAL
ACTIVITY.**



**1 IN 3 CANCER
DEATHS**

ARE DUE TO FACTORS RELATING TO POOR
NUTRITION AND PHYSICAL INACTIVITY,
INCLUDING OVERWEIGHT AND OBESITY.

BEING **OVERWEIGHT** OR **OBES** IS LINKED
TO A PERSON'S RISK OF GETTING AT LEAST



**14 TYPES
OF CANCER**

BREAST | COLON | ENDOMETRIAL | ESOPHOGEAL
GALL BLADDER | KIDNEY | PANCREATIC | RECTUM



68.8%

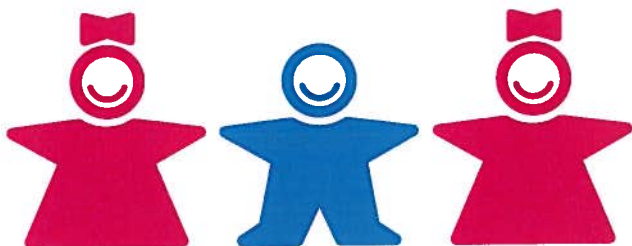
OF ADULTS IN THE UNITED STATES
AGES 20 AND OLDER ARE OVERWEIGHT,
INCLUDING 35.75% WHO ARE OBES.



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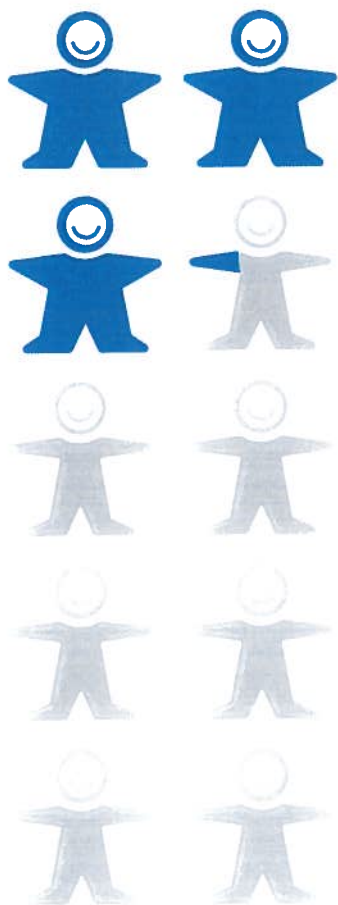
[IN KIDS]



CHILDHOOD OBESITY RATES HAVE MORE THAN **TRIPLED** IN THE PAST 4 DECADES.

31.8%

OF YOUTH AGES 2 TO 19 ARE OVERWEIGHT OR OBESE.



14% OF HIGH SCHOOL STUDENTS

DO NOT GET THE RECOMMENDED DAILY HOUR OF PHYSICAL ACTIVITY ON ANY DAY OF THE WEEK.

KINDERGARTEN – 5TH GRADE

30 MINUTES A DAY



The recommended minimum of physical education is 150 minutes per week or 30 minutes a day.



MONDAY

TUESDAY

WEDNESDAY

THURSDAY

FRIDAY

6TH – 12TH GRADE

45 MINUTES A DAY



The recommended minimum of physical education is 225 minutes per week or 45 minutes a day.



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**Testimony
House Committee on Education
HB 5196**



March 19, 2014

Dear Chair Lyons and members of the House Committee on Education:

The American Cancer Society Cancer Action Network (ACS CAN) supports HB 5196 and other efforts to increase physical activity, reduce overweight and obesity, and ultimately prevent cancer.

Obesity, poor nutrition, and physical inactivity are second only to tobacco as major risk factors for cancer. Being overweight or obese has been associated with increased risk of several different common cancers and lack of physical activity is a major contributor to weight gain.

Childhood obesity rates nationwide have more than tripled in the past four decades.ⁱ According to the Center for Disease Control (CDC), 13% of low-income Michigan children ages 2-5 are obese. For kids in high school grades 9-12, this number is 12%. On top of that, nearly 31% of Michigan adults are obese, with over 66% classified as overweight.

These statistics are especially concerning because about half of children who are overweight today will remain overweight in adulthood and 70 percent of those who are overweight by adolescence will remain so.ⁱⁱ Obesity is also placing an economic strain on our health care system and is estimated to cost Michigan \$5.4 billion annually.ⁱⁱⁱ

Today, many youth are increasingly sedentary throughout their day, meeting neither physical education nor national physical activity recommendations. Children's physical activity levels drop dramatically between the ages of 9-15.^{iv}

Schools are positioned to play an important role in health. Health doesn't just happen. Students must learn how to be healthy and be given the opportunity to practice the healthy behaviors they learned in a supportive and caring environment. Personal responsibility must be taught, learned and practiced. This is where schools can make a difference.

Quality physical education is the best way for youth to get a significant portion of their recommended physical activity and improve their physical fitness. Furthermore, it teaches students the basics of physical literacy and how to integrate exercise into their lives in order to establish a lifetime of physical activity and healthy living.

High quality physical education can help students adopt and maintain healthy behaviors and reduce childhood obesity. ACS CAN believes the legislation before you is a good first step but that more will need to be done to improve both the quality and quantity of physical education in Michigan. Specifically, we recommend:

ACS CAN Recommendations for Physical Education

- 150 minutes of physical education each week for children in elementary school
- 225 minutes of physical education per week for middle school and high school
- At least 50 percent of physical education class time should be spent in moderate to vigorous physical activity
- High schools should make physical education a graduation requirement

Substitutions and waivers to "opt" students out of physical and health education, through sports, band or other areas, are not acceptable. The focus is not simply for kids to be active, but to be learning how to be active now and for the rest of their lives. Those learning skills are not part of other curriculums or sports clubs.

In addition to improved physical fitness, a growing body of evidence demonstrates that physical education improves students' academic performance.^v Physically fit children have higher academic achievement and have been shown to score as high as twice as well on academic tests than those who were unfit.^{vi} Physically fit kids also behave better in class, have a greater ability to focus and miss less class time than their unfit peers.^{vii}

We recognize that obesity is a complex problem that requires a broad range of effective approaches. Increasing physical education in schools is just one strategy for addressing this serious public health problem. ACS CAN believes that promoting healthy behaviors to prevent obesity and maintain a healthy weight may be among the most critical actions we can take to promote wellness and reduce the burden of cancer.

ACS CAN supports HB 5196 as a step forward to prevent and reduce obesity, foster healthy behaviors and ultimately, prevent cancer. Thank you for the opportunity to provide testimony on this important legislation.

Most respectfully,



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ⁱ Ogden C and Carroll M. "NCHS Health E-Stat: Prevalence of Obesity Among Children and Adolescents: United States, Trends 1963-1965 Through 2007-2008." Division of Health and Examination Surveys, National Center for Health Statistics. Centers for Disease Control and Prevention. June 4, 2010. Available at http://www.cdc.gov/nchs/data/hestat/obesity_child_07_08/obesity_child_07_08.htm

ⁱⁱ American Cancer Society Cancer Prevention and Early Detection Facts and Figures. 2013.

ⁱⁱⁱ Trogon et.al. State and Payer-Specific Estimates of Annual Medical Expenditures Attributable to Obesity; Obesity (2011)

^{iv} Nader PR. Bradley RH. Houts RM., et. al. Moderate to vigorous physical activity from 9 to 15 years. *JAMA*. 2008;300(3):295-305.

^v Active Living Research, A National Program of the Robert Wood Johnson Foundation. Active Education: Physical Education, Physical Activity and Academic Performance. Research Brief. Fall 2007. Available online at <http://www.activelivingresearch.org/resourcesearch/summaries>.

^{vi} California Department of Education, 2005. California Physical Fitness Test: A study of the relationship between physical fitness and academic achievement in California using 2004 test results.

^{vii} Shore SM, Sachs ML, Lidicker JR, et. al. Decreased scholastic achievement in overweight middle school students. *Obesity* 2008;16,1535-1538; Geier AB, et. al. The Relationship Between Relative Weight and School Attendance. *Obesity* 2007. 15:2157-2161; Centers for Disease Control and Prevention. The Association Between School-Based Physical Activity, Including Physical Education, and Academic Performance U.S. Department of Health and Human Services; 2010